

The TEDDY Working Group on Off Label Use in Paediatrics

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European Network of Excellence for Paediatric Clinical Research

Off-label use in children

 Ranging from 40-90% depending on population and definitions

- Hence, more research is needed,
- BUT, in the meantime:

How do we prescribe effective and safe?



Lack of label ≠ lack of evidence!

Off-label use = more adverse events

? Should we restrict off-label use?

Lack of label ≠ lack of evidence!

Therefore: we need guidance!



Declaration on Good Off-Label Use Practice

Belgian initiative

European Network of Excellence for Paediatric Clinical Research

- But: supported financially by lobby organization of industry
- Why?: Recent concerning events in Member States following the passing of legislation to promote the off-label use of medicines for economic purposes, highlight the importance of preserving the European regulatory framework
 to ensure the safety of patients.

Off-label Use of medicinal products should only occur if the following criteria are met:

- 1. Presence of a severe, life-impairing or life-threatening condition;
- 2. Absence of authorised treatment or repeated treatment failure;
- 3. Absence of alternative treatments authorised for the condition;
- 4. The off-label use is supported by strong evidence in scientific literature;
- 5. The patient has been educated and has given his or her informed consent;
- 6. Presence of established reporting routes for adverse events and linked to off-label use.



Goal of Declaration

 Call on the European Medicines Agency to adopt strict guidelines to support healthcare practitioners and ensure economic benefit does not prevail over public health.



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NOT in best interest CHILDREN

ACTION:

TEDDY Working group GOLUP

Goal:

Declaration of Pediatric off-label prescribing Convince EMA not to adopt Belgian Declaration



GOLUP team

Adriana Ceci (Italy)

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Action plan

- 1. Survey on regulations of off-label use in EU countries, including reimbursement
- 2. Write Pediatric Declaration/guideline for prescribing
- 3. Lobby EC/EMA/writers of Declaration



Lobby activities

- 1. Lucia and Tjitske visited MEP meeting on the Declaration in EP, Fall 2016
 - Voiced our concerns
- 2. Follow-up: invitation by lobby group to visit Brussels
 Tjitske and Saskia met with Dr Doome and lobby company
 - Again voiced our concerns, with examples
 - well received
 - will study possibility to adjust the Declaration



Off label survery

Survey was developed

Audience: key leaders in pediatric pharmacology

Geography: Europe

Main questions

How is off-label prescribing regulated?

How relates off-label prescribing to reimbursement?

Status:

Not sent, as a European survey, not specific for children is being undertaken. Results?



Off label statement for children

To contain framework for off-label prescribing in children We have started a draft for the Declaration

Discussion points:

Do we need a pediatric specific Declaration?

Do we wait for Doome et al to adjust their Declaration?



Framework proposal – step 1

Is there licensed alternative? No, then:

Is drug advised in official treatment guidelines? No, then:

Is there sufficient scientific literature supporting effective and safe use?, No, then:

Is there sufficient practical experience with use of drug? No, then:

Make a 'individualized' efficacy and safety evaluation.





Life cycle of a drug monograph

Review of literature

Summarizing literature in draft monograph and risk analysis

Review by editorial board (multidisciploinary expert network: Pediatric specialists, general practioners, clinical pharmacologists, pharmacists

Reporting decisions of editorial board

(Adaption of monograph if indicated)

Publishing monograph

European Network of Excellence for Paediatric Clinical Research Maintenance of monograph (3-5 yearly regular review, if needed more frequent)

Framework proposal – Step 2

Perform a 'individualized' efficacy and safety evaluation,

Including

- Does the mechanism support intended therapeutic use?
- Are there specific safety concerns?
- Is the PK_PD relationship to be similar as in registered use?
- PK known in age of patient?
- Can PK be extrapolated?
- Is a suitable formulation available?
- Are their specific ethical questions?



Framework proposal – Step 3

Start treatment

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- For drugs where individualized evaluation is done:

- Document detailed outcome of evaluation in medical chart
- Discuss off-label use with parents
- Report any safety issues with the pharmacovigilance center

Preferably: report in prospective registries

Thank you!

Any questions?

